

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		05-23-01
O.I.P.E. CLASSIFIER		49	5/29/01
FORMALITY REVIEW	Sd	553	6/26/01
RESPONSE FORMALITY REVIEW	SP	1029	07/11/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 - Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/29/01
2	✓	✓	
3	✓✓✓		
4	✓✓✓		
5	✓✓✓		
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9	✓✓✓		
10	○○✓		
11	✓✓✓		
12	○○✓		
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24	○○○		
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26	✓○✓		
27	✓○○		
28	✓○○		
29	✓○○		
30	✓○○		
31	✓✓✓		
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33	✓✓✓		
34	✓○✓		
35	✓✓✓		
36	✓✓✓		
37	○✓✓		
38	✓-✓		
39	-✓		
40	✓		
41	✓		
42	✓		
43	✓		
44	✓		
45	✓		
46	✓		
47	✓		
48	✓		
49	✓		
50	○○○		

Claim	Final	Original	Date
51	-	○	5/29/01
52	✓	✓	
53	✓	✓	
54	✓	✓	
55	✓	○	
56	✓	✓	
57	-	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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10/29/01
2001
10/29/01